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TO THE UNITED STATES PATENT OFFICE**

Applicants Docket Number:  
USFI5026US CNT

Applicants:  
BEGON, et al.

Serial No.  
10/075,213

Filing Date:  
February 13, 2002

Title of Invention:  
Process for Producing Fine Medicinal Substances

**CERTIFICATE OF TRANSMISSION**  
I hereby certify that this correspondence is being transmitted via facsimile to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, at 703-872-9306, on Date of Deposit February 5, 2004  
Printed Name of Person Signing Certificate Bonnie Stein

Signature Bonnie Stein

Total Number of Pages Sent: 17

Attorney: W. C. Coppola

Group Art Unit: 1615  
Examiner: Pulliam, Amy E

TO: Mail Stop  
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Please acknowledge receipt of the below-listed documents for the above Application by returning this sheet, signed and dated, by return telefax to (908) 231-2626. If any fees are required, please charge our deposit account (18-1982) in the name of Aventis Pharmaceuticals Inc.

<input checked="" type="checkbox"/> Amendment, 37 CFR 1.111	<input type="checkbox"/> Fee Transmittal
<input type="checkbox"/> Charge deposit account, in duplicate	<input type="checkbox"/> Petition under 37 CFR _____
<input checked="" type="checkbox"/> Extension of Time Petition - 2 month	<input checked="" type="checkbox"/> Other <u>Claim Transmittal Fee Sheet</u>
<input type="checkbox"/> Issue Fee Transmittal & Advance Order	<input type="checkbox"/> Other _____
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Dated

Aventis Pharmaceuticals Inc., Route 202-206, P.O. Box 6800, Bridgewater, New Jersey 08807, U.S.A. [www.aventis.com](http://www.aventis.com)  
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Aventis Pharmaceuticals Inc. template (March 2001)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of

Bigon, et al.

Examiner: Pulliam, Amy E.

Application No.:

10/075,213

Art Unit: 1615

Filed: February 13, 2002

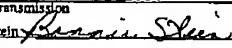
Title: **Process for Producing Fine Medicinal Substances****TELEFAX CERTIFICATE**

I hereby certify that this correspondence is being transmitted via facsimile, 703-372-9306, to the Commissioner for Patents, Alexandria, VA 22313, on

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Date of Transmission

Bonnie Stein

Signature 

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 Commissioner for Patents  
 P. O. Box 1450  
 Alexandria, VA 22313-1450

Transmitted herewith is an amendment in the above-identified application.

 No additional fee is required.

The fee has been calculated as shown below.

(1)	(2) CLAIMS REMAINING AFTER AMENDMENT*	(3)	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR**/***	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	22	MINUS	20	2	18.00	\$36
INDEPENDENT CLAIMS	4	MINUS	3	1	86.00	\$86
<b>MULTI-DEPENDENT CLAIMS(S), Per Application (290.00)</b>						
			<b>TOTAL AMENDMENT FEE FOR THIS AMENDMENT</b>			<b>\$122.00</b>

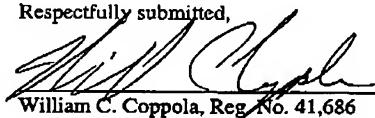
\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" in Total Claims is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" in (Independent) Claims is less than 3, write "3" in this space.

The Commissioner is hereby authorized to charge any fees under 37 C.F.R. 1.16 which may be required by this paper or credit any overpayment to Account No. 18-1982.

Respectfully submitted,



William C. Coppola, Reg. No. 41,686

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